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OMB APPROVAL

SEC 1972 Potential persons who are to respond to the collection of information contained in this (6-02) form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES OMB Number: 3235-0076 SECURITIES AND EXCHANGE COMMISSION Expires: May 31, 2005 Washington, D.C. 20549 BECD S.E.C. Estimated average burden RECEIVED hours per response. . 1 FEB 17 2005 FORM D 1086 SEC USE ONLY NOTICE OF SALE OF SECURITIES **Prefix** Serial PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION CC ARB Fund, LLC -- Offering of Membership Interests Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Filing Under (Check box(es) that [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) []ULOE apply): Type of Filing: [] New Filing [x] Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information rec	quested about the issuer		
CC ARB Fund, LLC Name of Issuer ([] check	if this is an amendment and name l	nas changed, and inc	dicate change.)
Address of Executive Offic 111 W. Jackson Boulevar (Number and Street, City, S 312.499.6900 Telephone Number (Includ	d, Suite 2020, Chicago, Illinois 60 State, Zip Code)	1604	
Address of Principal Busine Number (Including Area Co (if different from Executive		et, City, State, Zip C	Code) Telephone
Brief Description of Busine	ess: Hedgefund trading in conve	rtible securities	
Type of Business Organiza	tion		
[] corporation	[] limited partnership,	already formed	[X] other (please specify):
[] business trust	[] limited partnership,	to be formed	limited liability company
		Month Year	r
Actual or Estimated Date o	f Incorporation or Organization:	March 27, 2003	3 [X] Actual [] Estimated
Jurisdiction of Incorporation	n or Organization: (Enter two-lette CN for Canada; FN f		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation</u> D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:	[]	Promoter []	Beneficial Owner	[Executive Officer	[]	Director [General and/or Managing Partne
Full Name (Last name	first, i	f individual)						
Business or Residence	Addre	ess (Number an	d Street, City,	State, 2	Zip Code):			
Check Box(es) that Apply:	[]	Promoter []	Beneficial Owner	[]	Executive Officer	[]	Director	General and/or Managing Partner
Full Name (Last name	first, i	f individual)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			······································
Business or Residence	Addre	ess (Number an	d Street, City,	State, 2	Zip Code)			CONTROL CONTRO
Check Box(es) that Apply:	[]	Promoter []	Beneficial Owner	[]	Executive Officer	[]	Director	General and/or Managing Partner
Full Name (Last name	first, i	f individual)						

Check Box(es) that Apply:	[] Promoter [] Bene Own	-] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if individual)	<u> </u>			
Business or Residence	Address (Number and St	reet, City, Stat	e, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] Ben Own		[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if individual)				
Business or Residence	Address (Number and St	reet, City, Stat	e, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] Ben Own		[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if individual)				
Business or Residence	Address (Number and St	reet, City, Stat	e, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] Ben Ow		[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if individual)				
Business or Residence	Address (Number and St	reet, City, Stat	e, Zip Code)		
(Use blank	k sheet, or copy and use	additional co	pies of this sheet, a	as necessary.)	
	B. INFORMAT	TION ABOUT	OFFERING		
1. Has the issuer sold,	or does the issuer intend				Yes N
2. What is the minimum	Answer also in Ap n investment that will be	•	nn 2, if filing under any individual?		
	rmit joint ownership of a	_	·		Yes N
indirectly, any commis securities in the offerin registered with the SEG	n requested for each persision or similar remunerating. If a person to be listed and/or with a state or stare associated persons of	tion for solicital is an associate tates, list the na	ation of purchasers : ed person or agent of the broker of	in connection with of a broker or deale dealer. If more that	r an five

Full Na	ame (Las	t name fi	rst if ind	ividual)								
					ınd Street	, City, St	ate, Zip C	Code)				
	of Assoc						, 1					
States	in Which	Person I	isted Ha	s Solicite	ed or Inte	nds to So	licit Purc	hasers				
(Check	c "All Sta	tes" or cl	neck indi	vidual St	ates)					[]	All State	:s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ame (Las	t name fi	rst, if ind	lividual)								
Busine	ss or Res	idence A	ddress (1	Number a	and Street	, City, St	ate, Zip C	Code)				
Name	of Assoc	iated Bro	ker or D	ealer								
States	in Which	Person I	_isted Ha	s Solicit	ed or Inte	nds to So	licit Purc	hasers				
(Check	c "All Sta	ites" or cl	neck indi	vidual St	ates)	•••••				[]	All State	es .
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ame (Las	t name fi	rst, if inc	lividual)								
Busine	ess or Res	sidence A	ddress (Number a	and Street	, City, St	ate, Zip C	Code)				
Name	of Assoc	iated Bro	ker or D	ealer		-						
States	in Which	Person I	Listed Ha	as Solicit	ed or Inte	nds to So	licit Purc	hasers				
(Check	k "All Sta	ites" or cl	heck indi	vidual St	ates)					[]	All State	es:
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
												1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the

total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Offeri	ng Price		Sold
Debt	<u>\$</u> _	0	<u>\$</u>	0
Equity	<u>\$</u>	0	<u>\$</u>	0
[] Common [] Preferred				
Convertible Securities (including warrants)	<u>\$</u>	0	<u>\$</u>	0
Partnership Interests	<u>\$</u>	0	<u>\$</u>	0
Other (Specify: Limited liability company membership interests).	\$400,00	000,0	\$68,4	<u>75,000</u>
Total	\$400,00	0,000	\$68,4	75,000
Answer also in Appendix, Column 3, if filing under ULOE.				
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Aggre	
				r Amount
	Number	Investors		
Accredited Investors		<u> 18</u>	<u>\$68,4</u>	<u>75,000</u>
				^
Non-accredited Investors		0	<u>\$</u>	0
Non-accredited Investors		0 N/A	<u>\$</u>	0 N/A
			<u>\$</u>	
Total (for filings under Rule 504 only)		N/A	<u>\$</u> /A	
Total (for filings under Rule 504 only)	Type of	N/A N	/ A Dolla	
Total (for filings under Rule 504 only)	Type of	N/A	/A	N/A
Total (for filings under Rule 504 only)	Type of	N/A N	/ A Dolla	N/A
Total (for filings under Rule 504 only)	Type of	N/A N Security N/A N/A	/ A Dolla	N/A r Amount N/A N/A
Total (for filings under Rule 504 only)	Type of	N/A N Security N/A	/ A Dolla	N/A r Amount
Total (for filings under Rule 504 only)	Type of	N/A N Security N/A N/A	/ A Dolla	N/A r Amount N/A N/A

Accounting Fees			[]\$25,000
Engineering Fees Sales Commissions (specify finders' fees separately			[]\$
Other Expenses (identify)			[] \$ [] \$100,0 0
Total			[]\$200,00
1000	***************************************	•••••	[] \$200,00
b. Enter the difference between the aggregate offering pand total expenses furnished in response to Part C - Quegross proceeds to the issuer."	estion 4.a. This diffe	erence is the "adjusted	
5. Indicate below the amount of the adjusted gross proced proposed to be used for each of the purposes shown. If the is not known, furnish an estimate and check the box to the total of the payments listed must equal the adjusted gross forth in response to Post C. Overtion 4 below.	he amount for any he left of the estimate	purpose ate. The	
forth in response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees			[]\$
Purchase of real estate			[]\$
Purchase, rental or leasing and installation of mach	ninery		[]\$
Construction or leasing of plant buildings and facil		[]\$	[]\$
Acquisition of other businesses (including the valu securities involved in this offering that may be use exchange for the assets or securities of another iss	e of ed in uer	[]\$	
pursuant to a merger)		r. a. 6	r. 3. o
Repayment of indebtedness			[]\$
Working capital			[]\$
Other (specify): Investing and trading convertib	ne securities		[]\$68,275,0
		[]\$	[]\$
Column Totals		[]\$	[]\$
Total Payments Listed (column totals added)	•••••		\$68,275,000
D. FEDERAL S	IGNATURE		
The issuer has duly caused this notice to be signed by the is filed under Rule 505, the following signature constitute. U.S. Securities and Exchange Commission, upon writte the issuer to any non-accredited investor pursuant to particular to the issuer to any non-accredited investor pursuant to particular to the issuer to any non-accredited investor pursuant to particular to the investor pursuant	ites an undertaking in request of its staf	by the issuer to furnisf, the information furn	sh to the
Issuer (Print or Type)	Signatūro)	Date	e
CC ARB FUND LLC	Com V	VV Fe	ebruary 8, 2005
Name of Signer (Print or Type)	itle of Signer (Prin	t or Type)	
Allan Weine	M - 1	irector of the	Messa
Man Weine	1 canaying 1	inecion of The	rianager

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)